



City of Miami Beach, 1700 Convention Center Drive, Miami Beach, Florida 33139 www.miamibeachfl.gov

OFFICE OF THE CITY CLERK, Rafael E. Granado, City Clerk
Tel: 305.673.7411, Fax: 305.673.7254
Email: CityClerk@miamibeachfl.gov

MEMORANDUM

TO: Mayor Philip Levine and Members of the City Commission
FROM: Rafael E. Granado, City Clerk
DATE: June 5, 2015
SUBJECT: City Commission At-Large Nominations for June 10, 2015 – **Release # 3**

Below please find the City Commission At-Large Nominations received to date for the June 10, 2015 Commission Meeting. For a list of the vacant categories on each board/committee, please see Item R9A1 of the June 10, 2015 Commission Meeting Agenda. Changes made after Release # 2 are reflected in **red**.

BOARDS AND COMMITTEES

a. Affordable Housing Advisory Committee (Vacancies: 6)

No nominations received to date.

b. Budget Advisory Committee (Vacancy: 1)

No nominations received to date.

c. Health Advisory Committee (Vacancies: 4)

Dr. Richard Awdeh (Release # 1 Page 5)

- Nominated for **appointment** (individual from the corporate level category) by Commissioner Grieco.
- Nominated for **appointment** (individual from the corporate level category) by Commissioner Malakoff. (Release # 2 Page 3)
- **Nominated for appointment (individual from the corporate level category) by Commissioner Tobin. (Release # 3 Page 3)**

Rachel Schuster (Release # 1 Page 17)

- Nominated for **reappointment** (administrator from an Adult Congregate Living Facility (ACLF) and/or an Assisted Living Facility (ALF) category) by Commissioner Grieco.
- **Nominated for reappointment (administrator from an Adult Congregate Living Facility (ACLF) and/or an Assisted Living Facility (ALF) category) by Commissioner Tobin. (Release # 3 Page 3)**
- **Updated Application, Resume and License. (Release # 3 Page 7)**

d. Miami Beach Cultural Arts Council (Vacancy: 2)

Daniel Novela (Release # 1 Page 27)

- Nominated for **appointment** (At-Large category) by Commissioner Grieco.
- Nominated for **appointment** (At-Large category) by Commissioner Malakoff. (Release # 2 Page 3)

e. Miami Beach Human Rights Committee (Vacancies: 1)

Carl H. Linder (Release # 1 Page 35)

- Nominated for **appointment** (At-Large category) by Commissioner Grieco.
- Nominated for **appointment** (At-Large category) by Commissioner Malakoff. (Release # 2 Page 3)
- **Nominated for appointment** (At-Large category) by Commissioner Tobin. (Release # 3 Page 3)

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Granado, Rafael

From: Kane, Dessiree
Sent: Tuesday, June 09, 2015 12:46 PM
To: Hatfield, Liliam
Cc: Granado, Rafael; LaRosa, Clara
Subject: re: Co Nominations for Commissioner Tobin

Hi Lily,

Commissioner Tobin would like to co-nominate the following people:

Dr. Richard Awdeh – Nominate for Appointment, Health Advisory Committee

Rachel Shuster – Nominate for Reappointment, Health Advisory Committee

Carl Linder – Nominate for Appointment, Miami Beach Human Rights Committee

Thank you.

Best Regards,

Dessiree

MIAMI BEACH

Dessiree Kane, *Aide to Commissioner Tobin*

OFFICE OF THE MAYOR AND COMMISSION
1700 Convention Center Drive, Miami Beach, FL 33139
Tel: 305-673-7107 / Fax: 305-673-7096 / www.miamibeachfl.gov

We are committed to providing excellent public service and safety to all who live, work and play in our vibrant, tropical, historic community.

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Rachel Schuster

- Updated Application, Resume and License.

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MIAMI BEACH

BOARD AND COMMITTEE APPLICATION FORM

Last Name Schuster		First Name Rachel		Middle Initial
Home Address		City Miami Beach	State FL	Zip Code 33140
Home Telephone	Work Telephone (305) 672-1771	Cellular Telephone (305) 458-3835	Email address	
Business Name 42 Collins Ave.		Occupation Nursing Home Administrator		
Business Address Miami Beach		City FL	State FL	Zip Code 33139
Professional License (describe): NH 4421		Expires: 7/30/2016		

Please attach a copy of currently effective professional license.

Pursuant to City Code section 2-22(4)a & b: Members of agencies, boards and committees shall be affiliated with the City. This requirement shall be fulfilled in the following ways: a. An individual shall have been a resident of the City for a minimum of six months; or b. An individual shall demonstrate ownership/interest for a minimum of six months in a business established in the City for a minimum of six months.

- Resident of Miami Beach for a minimum of six (6) months: Yes ☒ or No ☐
- Demonstrates ownership/interest in a business in Miami Beach for a minimum of six months: Yes ☒ or No ☐
- Are you a registered voter in Miami Beach: Yes ☒ or No ☐
- I am now a resident of: North Beach ☐ South Beach ☐ Middle Beach ☒
- I am applying for an appointment because I have special abilities, knowledge and experience. Please list below:
Healthcare - Skilled Nursing / Long Term Care

- Are you presently a registered lobbyist with the City of Miami Beach? Yes ☐ or No ☒

Please list your preferences in order of ranking [1] first choice [2] second choice, and [3] third choice. **Please note that only three (3) choices will be observed by the City Clerk's Office.**

<input type="checkbox"/> Ad Hoc Committee Centennial Celebration	<input checked="" type="checkbox"/> Health Advisory Committee	<input type="checkbox"/> Parks and Recreation Facilities Board ∞
<input type="checkbox"/> Affordable Housing Advisory Committee	<input type="checkbox"/> Health Facilities Authority Board	<input type="checkbox"/> Personnel Board
<input type="checkbox"/> Art in Public Places Committee	<input type="checkbox"/> Hispanic Affairs Committee	<input type="checkbox"/> Planning Board ☆
<input type="checkbox"/> Board of Adjustment ☆	<input type="checkbox"/> Historic Preservation Board ☆	<input type="checkbox"/> Police Citizens Relations Committee
<input type="checkbox"/> Budget Advisory Committee	<input type="checkbox"/> Housing Authority	<input type="checkbox"/> Production Industry Council
<input type="checkbox"/> Committee on the Homeless	<input type="checkbox"/> Marine & Waterfront Protection Authority	<input type="checkbox"/> Sustainability Committee
<input type="checkbox"/> Committee for Quality Education in MB	<input type="checkbox"/> Miami Beach Commission for Women	<input type="checkbox"/> Transportation, Parking, & Bicycle-Pedestrian Facilities Committee
<input type="checkbox"/> Convention Center Advisory Board	<input type="checkbox"/> Miami Beach Cultural Arts Council	<input type="checkbox"/> Visitor and Convention Authority
<input type="checkbox"/> Design Review Board ☆	<input type="checkbox"/> Miami Beach Human Rights Committee	
<input type="checkbox"/> Disability Access Committee	<input type="checkbox"/> Miami Beach Sister Cities Program	
<input type="checkbox"/> Gay, Lesbian, Bisexual and Transgender Enhancement Committee (GLBT)	<input type="checkbox"/> Normandy Shores Local Government Neighborhood Improvement	

* Board members are required to file Form 1 - "Statement of Financial Interest" with the State.

☆ If you seek appointment to a professional seat (e.g., lawyer, architect, etc.) on the Board of Adjustment, Design Review Board, Historic Preservation Board or Planning Board, attach a copy of your currently-effective license, and furnish the following information:

Type of Professional License _____ License Number _____

License Issuance Date _____ License Expiration Date _____

∞ **Note:** If applying for the Youth Center positions of the Parks and Recreations Facilities Board, please indicate your affiliation with the Scott Rakow Youth Center and/or the North Shore Parks Youth Center: _____

• Please describe your past service with the City's Youth Centers (include dates of service): _____

• Present participation in Youth Center activities by your children: Yes ☐ No ☒

If yes, please list below the names of your children, their ages and the programs in which they participate:

Child's name: _____ Age: _____ Program: _____

Child's name: _____ Age: _____ Program: _____

• Have you ever been convicted of a felony? Yes ☐ or No ☒ If yes, please explain in detail: _____

• Do you currently have a violation(s) of City of Miami Beach Code? Yes ☐ or No ☒ If yes, please explain in detail: _____

• Do you currently owe the City of Miami Beach any money? Yes ☐ or No ☒ If yes, explain in detail: _____

• Are you currently serving on any City Board or Committee? Yes ☒ or No ☐ If yes, which board/committee? Health Advisory Committee

• In what organization(s) in the City of Miami Beach do you currently hold membership?

Miami Beach Chamber of Commerce Member
Name Position

Name Position

• List all properties owned or in which you have an interest within the City of Miami Beach:

WA

• Are you now employed by the City of Miami Beach? Yes ☐ or No ☒

Which department and title? _____

• Pursuant to City Code Section 2-25 (b): Do you have a parent ☐, spouse ☐, child ☐, brother ☐ or sister ☐ who is employed by the City of Miami Beach? Yes ☐ or No ☒

If "Yes," identify person(s) and department(s): _____

The following information is voluntary and is neither part of your application nor has any bearing on your consideration for appointment. It is being asked to comply with City diversity reporting requirements.

Gender: Male ☐ Female ☒

Race/Ethnic Categories

What is your race?

☐ African-American/Black

☒ Caucasian/White

☐ Asian or Pacific Islander

☐ Native-American/American Indian

☐ Other - Print Race: _____

Do you consider yourself to be Spanish, Hispanic or Latino/a? Mark the "No" box if not Spanish, Hispanic, Latino/a.

☒ No
☐ Yes

Do you consider yourself Physically Disabled?

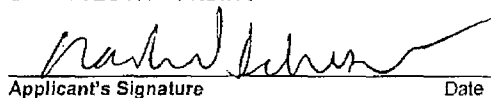
☒ No
☐ Yes

NOTE: IF APPOINTED, YOU WILL BE REQUIRED TO FOLLOW CERTAIN LAWS THAT APPLY TO CITY BOARD/COMMITTEE MEMBERS. THESE LAWS INCLUDE, BUT ARE NOT LIMITED TO:

- o Prohibition from directly or indirectly lobbying City personnel (Miami Beach City Code section 2-459).
- o Prohibition from contracting with the City (Miami-Dade County Code section 2-11.1).
- o Prohibition from lobbying before the board/committee you have served on for period of one year after leaving office (Miami Beach City Code section 2-26).
- o Requirement to disclose certain financial interests and gifts (Miami-Dade County Code section 2-11.1).
- o CMB Community Development Advisory Committee: prohibition, during tenure and for one year after leaving office, from having any interest in or receiving any benefit from Community Development Block Grant funds for either yourself, or those with whom you have business or immediate family ties (CFR 570.611).
- o Sunshine Law - Florida's Government-in-the-Sunshine Law was enacted in 1967. Today, the Sunshine Law regarding open government can be found in Chapter 286 of the Florida Statutes. These statutes establish a basic right of access to most meetings of boards, commissions and other governing bodies of state and local governmental agencies or authorities.
- o Voting conflict - Form 8B is for use by any person serving at the county, city or other local level of government on an appointed or elected board, council, commission, authority or committee. It applies equally to members of advisory and non-advisory bodies who are presented with a voting conflict of interest under Section 112.3143, Florida Statutes.

Upon request, copies of these laws may be obtained from the City Clerk.

I HEREBY ATTEST TO THE ACCURACY AND TRUTHFULNESS OF THE APPLICATION; AND I HAVE RECEIVED, READ AND WILL ABIDE BY CHAPTER 2, ARTICLE VII, OF THE MIAMI BEACH CITY CODE, ENTITLED "STANDARDS OF CONDUCT FOR CITY OFFICERS, EMPLOYEES AND AGENCY MEMBERS AND ALL OTHER APPLICABLE COUNTY AND/OR STATE LAWS AND STATUTES ACCORDINGLY."


Applicant's Signature

Date


Name of Applicant (PLEASE PRINT)

Received in the City Clerk's Office by : _____
Name of Deputy Clerk Control No. Date

PLEASE ATTACH A CURRENT RESUME, PHOTOGRAPH AND A COPY OF ANY APPLICABLE PROFESSIONAL LICENSE.

ATTACH ADDITIONAL SHEETS, IF NECESSARY, TO PROVIDE REQUIRED INFORMATION.

MIAMI BEACH

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CITY CLERK'S OFFICE

Telephone: 305.673.7411 Fax: 305.673.7254

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Acknowledgement of fines/suspension for Board/Committee Members for failure to comply with Miami-Dade County Financial Disclosure Code Provision Code Section 2-11.1(i) (2)

Board Member's Name: Rachel Schuster

I understand that no later than **July 1, of each year** all members of Boards and Committees of the City of Miami Beach, including those of a purely advisory nature, are required to comply with Miami-Dade County Financial Disclosure Requirements. This means that the members of City Advisory Boards, whose sole or primary responsibility is to recommend legislation or give advice to the City Commission, must file, even though they may have been recently appointed.

One of the following forms **must be filed** with the City Clerk of Miami Beach, 1700 Convention Center Drive, Miami Beach, Florida, no later than 12:00 noon of **July 1, of each year**.

1. A "Source of Income Statement"
2. A "Statement of Financial Interests (Form 1)"
3. A Copy of your latest Federal Income Tax Return

Failure to file one of these forms, pursuant to the Miami-Dade County Code, may subject the person to a fine of no more than \$500, 60 days in jail or both.

[Signature]

Signature

6/5/15
Date

Updated: Monday, April 20, 2015

Rachel Schuster

rschuster@hebrewhomes.org

Summary of Qualifications:

- 15 years of Rehabilitation and Nursing Center experience
- 2014 and 2015 America's Best Nursing Homes according to U.S News and World Report
- Experience managing the direct day-to-day functions and overall operations of the facility

Education

Northcentral University	2015
Post Master Business Administration Certificate	
Florida International University	2003
Master of Public Administration	Miami, FL.
Florida International University	2001
Bachelor of Health Services Administration	Miami, FL.

Sum Cum Laude

Experience

Administrator	2007-Current
South Point Plaza Rehabilitation and Nursing Center	Miami Beach, FL.
<ul style="list-style-type: none">• Oversee the direct day-to-day function and overall operation of the 230 bed facility• Manage diverse staff of 300• Assist department directors in the planning, scheduling in -service training classes, on-the-job training and orientation programs• Lead facility staff members in all aspects of facility operations, including setting priorities and job assignments• Develop strategic business plan for operations of facility that includes business growth opportunities, competition, potential market area changes, etc.• Update and manage facility policies and procedures for employees, residents and visitors	

- Serve on various committees including quality assurance, risk management, cost control, utilization review, infection control, etc.
- Assist Human Resources to ensure compliance with employment laws and company policies
- Ensure facility personnel, residents and visitors follow safety regulations
- Oversee operating budget for facility

Administrator

2003-2007

Aventura Plaza Rehabilitation and Nursing Center

North Miami Beach, FL.

- Oversaw and managed the operations of 75 bed facility
- Directly managed a staff of (how many did you over see)
- Monitored the Human Resources practices to ensure compliance with employment laws and company policies
- Developed and implemented a marketing strategy for the facility that reflects services opportunities, competition, potential market areas
- Meet with department directors on a regularly scheduled basis, conduct and participate in in-service classes and supervisory level training programs
- Ensured the residents rights to fair and equitable treatment are followed by all facility staff

Administrator in Training

2000-2002

Arch Plaza Nursing and Rehabilitation Center

North Miami, FL.

- Oversaw the training of staff in policies and procedures of the facility
- Collaborated with other administrative members to create appropriate training programs for staff
- Ensure that all personnel attend and participate in annual OSHA and CDC in-service training programs for hazard communication, TB management and bloodborne pathogens standards
- Assist in creating and maintaining a sense of warmth, personal interest and positive emphasis in the facility

References Available on Request

AC#6073965

STATE OF FLORIDA
DEPARTMENT OF HEALTH
DIVISION OF MEDICAL QUALITY ASSURANCE

DATE	LICENSE NO.	CONTROL NO.
06/18/2014	NH 4421	13473

The **NURSING HOME ADMINISTRATOR**
named below has met all requirements of
the laws and rules of the state of Florida.
Expiration Date: **SEPTEMBER 30, 2016**
RACHEL SCHUSTER



Rick Scott
GOVERNOR



John H. Armstrong, MD, FACS
STATE SURGEON GENERAL

DISPLAY IF REQUIRED BY LAW